Docket No.: PF-0213-2 DIV

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24, 2003. By:

Printed: Katherine Stofer

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED

In re Application of:

Hillman et al.

Title:

HUMAN LEA-MOTIF DEVELOPMENTAL PROTEIN

NOV 0 3 2003

Serial No.:

09/892,316

Filing Date:

June 26, 2001

TECH CENTER 1600/2900

Examiner:

Carlson, K.

Group Art Unit: 1653

09/892,316

Mail Stop: Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

- 1. Return Receipt Postcard; and
- 2. Response to Restriction Requirement (10 pp.).

The fee has been calculated as shown below

| Claims | Claims After Amendment | - | Claims Previously Paid For | = | Present Extra | Other Small Rate | | Additional Fee(s) | | |
|--|---------------------------|---|----------------------------------|---|---------------|------------------------|------------|-------------------|--|---|
| Total | 20 | - | 20 | = | 0 | x\$18.00 | | \$ | | 0 |
| Indept. | 2 | - | 3 | = | 0 | x\$86.00 | | \$ | | 0 |
| First Presentation of Multiple Dependent Claims: +290.00 | | | | | | | | \$_ | | 0 |
| | | | | | | | Total Fee: | \$ | | 0 |

X No additional Fee is required.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE CORPORATION

Date: October 24, 2003

Barrie D. Greene Reg. No. 46,740

Direct Dial Telephone: (650) 621-7576

Customer No.: 27904

3160 Porter Drive Palo Alto, California 94304

Phone: (650) 855-0555 Fax: (650) 845-4166

OT 3 0 2003

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RESPONSE TO RESTRICTION REQUIREMENT UNDER 35 U.S.C. 121

Sir:

This paper is responsive to the Restriction Requirement and Request for Election dated September 29, 2003, setting a **one (1) month** term for response. Prior to examination of the application, please amend the specification of the above-identified application as listed below.